Long Term Care Financing

Governor's Commission on Medicaid Care Management

Dr. Jonathan McCosh Assistant Professor Colby-Sawyer College June 11, 2015

Long Term Care Funding

- Medicaid
- Medicare
- Other Government Programs (Title XX and Title IIIB)
- Private Insurance
- Private Pay
- Other

Medicaid Long Term Care Funding – 2015 Budget

Nursing Services – County Participation (5942)

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$ 195.5M Nursing Homes
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- \$ 49.2M Home Health Care
- \$ 10.1M Mid-Level Care

Medicaid Long Term Care Funding – 2015 Budget

Other Medicaid Funding

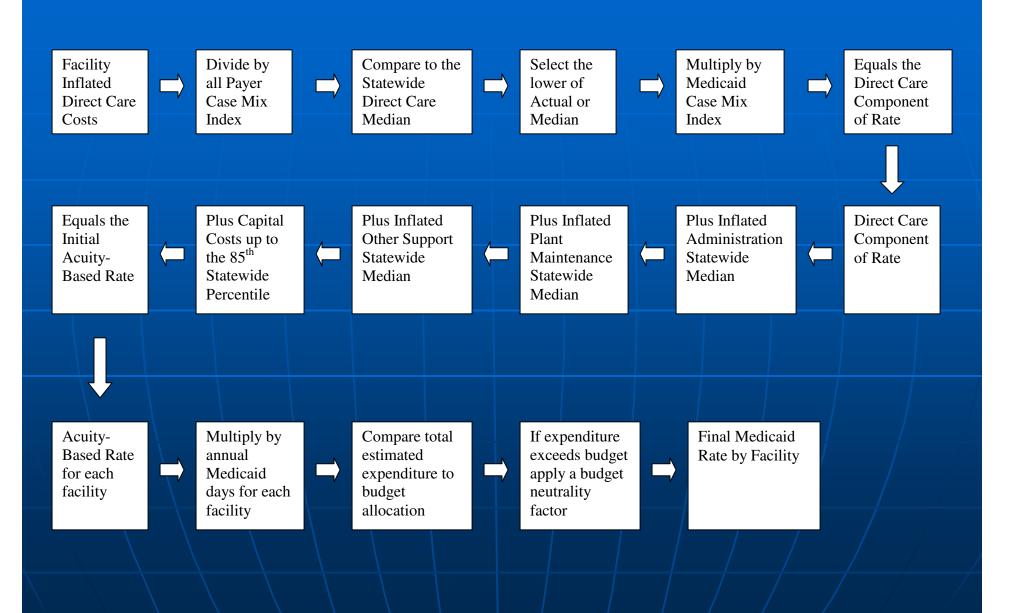
- \$ 65.0M Provider Payments
- \$ 75.3M Medicaid Quality
 - **Incentive Program**
- **\$ 44.2M Prospective Share**

Long Term Care Funding – 2015 Budget

Other Funding

\$ 24.8M Grants

Acuity-based Rate Calculations



Medicaid Quality Incentive Program

- Began November 1, 2004 –
 Retroactive to May 1, 2003
- Provides incremental federal funding to nursing facilities
- Quality Assessment of 5.5% of Net Patient Services Revenue

Prospective Share

- Applies only to County Nursing Facilities
- State Calculation of variance between Medicaid rates and the Medicare rates for these same residents
- Requires 10 months of actual data and 2 months of estimates

Medicaid Managed Care Issues

- New Hampshire's reimbursement system for Long Term Care is unique
- Initial communication indicated that the State would continue with the MQIP and Proshare
- Unclear how the M.C.O's could logistically do these payments

Medicaid Managed Care Issues

- Acuity-based reimbursement has been in effect since 1999 – It is well understood by providers
- Provides incentives for facilities to take higher acuity residents
- Need for this level-of-care due to demographic trends and to offer a full continuum of care

Medicaid Managed Care Issues

- Most states with Medicaid Managed Care continue to use State calculations for Nursing Facility rates
- Limited history on M.C.O. rate calculation for long-term care
- L.T.C. is generally not a profit center for the M.C.O.

Questions ???